FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, Section 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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| | OMR | A PDI | ÓV |

OMB APPROVAL

OMB Number: 3235-0076

Expires: September 30, 2008 Estimated average burden hours per response 16

| SEC USE ONLY | | | | | |
|--------------|------------|--------|--|--|--|
| Prefix | | Serial | | | |
| | | | | | |
| | DATE RECEI | VED | | | |
| | | | | | |

| Name of Offering (☐ check if this is a | n amendment and name | has changed, and indica | ite change.) | | |
|---|----------------------|---------------------------|--------------------|---------------------|--|
| Series A Preferred Stock (including | ng Warrants to pure | hase Series A Prefe | red Stock and the | Common Stock is | suable upon conversion) |
| Filing Under (Check box(es) that apply) | : 🔲 Rui | e 504 🔲 Rul | e 505 🗷 R | ule 506 | Section 4(6) ULOE |
| Type of Filing: | Filing 🗀 Amendr | nent | | | |
| | | A. BASIC IDENTIFI | CATION DATA | | |
| 1. Enter the information requested ab- | out the issuer | | | | l (88)(il 88)(b) (8)(il 88)(b) dinne lekki (80)(legge kilor (80) |
| Name of Issuer (check if this is an a | mendment and name ha | changed, and indicate | change.) | | (1881) |
| Eco-Products, Inc. | | | | | c commensation commensation acceptable (1984) (1984) (1984) (1984) |
| Address of Executive Offices | (Numb | er and Street, City. Star | e, Zip Code) Telep | ohone Number (Inclu | 08059771 |
| 3640 Walnut Street, Boulder, CO | 80301 | | · | 303-749-4800 | ı |
| , | | | | | |
| Address of Principal Business Operation | s (Numb | er and Street, City, Sta | e. Zip Code) Teler | hone Number (Inclu | ling Area Code) |
| (if different from Executive Offices) | | | | _ | Mon SEC. |
| Same | | | PROCES | SED | Wall Processing |
| Brief Description of Business | | | PROGE | /// | Scellon |
| Production and sale of food service | e items made from r | enewable resources | 1A | 0000 | 022 |
| Type of Business Organization | | | SEL L.Z. | 7000 | 3EP 102008 |
| corporation | ☐ limited partnershi | o, already formed | other (please | SPOTPOC | - CHAN |
| □ business trust | ☐ limited partnershi | p, to be formed | THOMSON | KENIEKO | Washington, DC |
| | 1 | Month Year | | | ଗଳିଷ |
| Actual or Estimated Date of Incorporation | • | 10 1990 | 🗷 Actua | l 🔲 Estima | ted |
| Jurisdiction of Incorporation or Organiza | , | U.S. Postal Service abl | | CO | |
| | Civitor Canada | ; FN for other foreign j | urisdiction) | CO | |

GENERAL INSTRUCTIONS

Fadarat

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

ı A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years: Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;** Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Boxes ☐ Promoter ☐ Beneficial Owner Executive Officer ☑ Director ☐ General and/or that Apply: Managing Partner Full Name (Last name first, if individual) Savage, Stephen Business or Residence Address (Number and Street, City, State, Zip Code) c/o Eco-Products, Inc., 3640 Walnut Street, Boulder, CO 80301 Check Boxes Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or that Apply: Managing Partner Full Name (Last name first, if individual) Savage, Stephen and Judith Business or Residence Address (Number and Street, City, State, Zip Code) c/o Eco-Products, Inc., 3640 Walnut Street, Boulder, CO 80301 Check Boxes ☑ Director ☐ General and/or ☐ Promoter □ Beneficial Owner Executive Officer that Apply: Managing Partner Full Name (Last name first, if individual) Flannery, Steve Business or Residence Address (Number and Street, City, State, Zip Code) c/o Eco-Products, Inc., 3640 Walnut Street, Boulder, CO 80301 Check Boxes ☐ Promoter ☐ Beneficial Owner ■ Director ☐ General and/or ☐ Executive Officer that Apply: Managing Partner Full Name (Last name first, if individual) Eiss, Drew Business or Residence Address (Number and Street, City, State, Zip Code) 4303 Black Cherry Court, Boulder, CO 80301 Check Boxes ☐ Executive Officer ■ Director ☐ Promoter Beneficial Owner ☐ General and/or that Apply: Managing Partner Full Name (Last name first, if individual) Capsalis, Bill Business or Residence Address (Number and Street, City, State, Zip Code) c/o Eco-Products, Inc., 3640 Walnut Street, Boulder, CO 80301 Check Boxes E Director ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ General and/or that Apply: Managing Partner Full Name (Last name first, if individual) Vernon, Luke Business or Residence Address (Number and Street, City, State, Zip Code) 1466 Rockmont Circle, Boulder, CO 80305 Check Boxes Director General and/or ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer that Apply: Managing Partner Full Name (Last name first, if individual) Woloson, Todd Business or Residence Address (Number and Street, City, State, Zip Code) c/o Greenmont Capital Partners, 1628 Walnut Street, Boulder, CO 80302 Check Boxes ☐ Promoter ☐ Director ■ Beneficial Owner ☐ Executive Officer General and/or that Apply: Managing Partner Full Name (Last name first, if individual) Greenmont Capital Partners II, LP Business or Residence Address (Number and Street, City, State, Zip Code)

Beneficial Owner

1628 Walnut Street, Boulder, CO 80302

□ Promoter

1628 Walnut Street, Boulder, CO 80302

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)
Greenmont Capital Partners II-QP, LP

Check Boxes

that Apply:

☐ Executive Officer

□ Director

☐ General and/or

Managing Partner

| | | | | В | INFORM | ATION AB | OUT OFFE | RING | | | | |
|--|--|--|--|------------------------------|-------------------------------|-------------------------------|---------------------------------|---------------------------------|-------------------------------------|-----------------------|--------------|--------------|
| 1. Has | the issuer sold, or | does the issu | er intend to | sell. to non- | -accredited i | nvestors in t | his offering? | | | ************* | Yes | No |
| Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | K | | | |
| 2. What is the minimum investment that will be accepted from any individual? | | | | | | | | \$ | N/A | | | |
| 3. Does the offering permit joint ownership of a single unit? | | | | | | | Yes | No | | | | |
| | | | | | | | | | | | × | |
| sim asso dea for | er the information ilar remuneration I peiated person or a ler. If more than f that broker or deal | for solicitation gent of a brok ive (5) persor er only. | n of purchas ker or dealer as to be listed | ers in conne registered v | ection with s with the SEC | ales of secur Cand/or with | ities in the o a state or st | ffering. If a pates, list the r | person to be lis name of the bro | ited is an oker or | | |
| | ne (Last name first | , if individual | 1) | | | | | | | | | |
| N/A | 12 | 1 (Nth . | | Cian Chara | Win Code | | | | | | · <u>-</u> - | ·-·· |
| Business | or Residence Add | iress (Numbe | r and Street, | City, State. | Zip Code) | | | | | | | |
| Name of | Associated Broke | r or Dealer | | <u></u> | | | | | | | | |
| States in | Which Person Lis | ted Has Solic | ited or Inten | ds to Solici | Purchasers | * | | | | | | |
| (Check " | All States" or ched | ck individual | States) | | ,, | | | | | | □ | l All States |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [1D] |
| [1L] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| (RI) | [SC] | [SD] | [TN] | [TX] | (UT) | [VT] | [VA] | [VA] | [WV] | [WI] | [WY] | [PR] |
| Full Nan | ne (Last name first | . if individual | 1) | | | | | | | | | |
| Business | or Residence Add | iress (Number | r and Street. | City, State, | Zip Code) | | | | | | | |
| | | | | | | | | | | | | |
| Name of | Associated Broke | r or Dealer | | | | | | | | | | |
| States in | Which Person Lis | ted Has Solic | ited or Inten | ds to Solici | Purchasers | | | | | | 1 149 | |
| (Check " | All States" or ched | ck individual | States) | | | | | | | | | l All States |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [1A] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | (NH) | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [VA] | [WV] | [WI] | [WY] | [PR] |
| Full Nan | ne (Last name first | . if individual | l) | | | | | | | | , | · · · · |
| Business | or Residence Add | lress (Numbe | r and Street, | City, State, | Zip Code) | | <u> </u> | | | | | |
| | | | | · | - | | | _ | | | | |
| Name of | Associated Broke | r or Dealer | | | | | | | | | | |
| States in | Which Person Lis | ted Has Solic | ited or Inten | ds to Solici | Purchasers | | | | | | | |
| (Check " | All States" or chec | ek individual | States) | | | | | | | | | l All States |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| (IL) | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [[[] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [VA] | [WV] | (WI) | (WY) | [PR] |

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EAFENSES AND | OSE O | FIROCEEDS | | | |
|----|---|------------|------------------------------------|---------|-----------|--------------|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | | | | |
| | Type of Security | | Aggregate | | Ame | ount Already |
| | | | ffering Price | | | Sold |
| | Debt | | | | \$ | |
| | Equity | s | | | | 2,050,002 |
| | □ Common ⊠ Preferred * | - | | | | |
| | Convertible Securities (including warrants) | \$ | | | 9 | |
| | Partnership Interests | | | | | |
| | Other () | | | | _ | |
| | Total | \$ \$ | 2,050,002 | | \$ \$ | 2,050,002 |
| | | " — | 2,050,002 | | Ψ <u></u> | 2,030,002 |
| _ | Answer also in Appendix, Column 3, if filing under ULOE. | * 0 | | 0. 6 | 10. 1 | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | purch | use Series A Pro se and the Con | eferred | Stock iss | |
| | | | | | Ä | Aggregate |
| | | | Number | | Do | lar Amount |
| | | | Investors | | of | Purchases |
| | Accredited Investors | _ | 3 | | \$ | 2,050,002 |
| | Non-accredited Investors | | 0 | | \$ | 0 |
| | Total (for filings under Rule 504 only) | | | | \$ | |
| | Answer also in Appendix. Column 4. if filling under ULOE. | | | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | | | | |
| | | | Type of | | Do | llar Amount |
| | | | Security | | | Sold |
| | Type of Offering | | | | | |
| | Rule 505 | | | | \$ | |
| | Regulation A | | | | \$ | |
| | Rule 504 | | | | \$ | |
| | Total | | | | \$ | ·· |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | | | |
| | Transfer Agent's Fees | | | | \$ | |
| | Printing and Engraving Costs | | | | \$ | |
| | Legal Fees | | | × | | 40,000 |
| | Accounting Fees | | | _ | | |
| | Engineering Fees | | | | | |
| | Sales Commissions (specify finders' fees separately) | | | | | |
| | Finders' Fees | | | | \$ \$ | |
| | | | | _ | ~ | |

Other Expenses (Identify) Blue Sky Fees

Total.....

375

40,375

\$____

×

×

| C. OFFERING PRICE, NUMBER OF I | | | | |
|---|---------------------------------|---|---------------------------------------|----------------------|
| Enter the difference between the aggregate offering price give furnished in response to Part C – Question 4.a. This difference is the | | | | \$2,009,627 |
| Indicate below the amount of the adjusted gross proceeds to the issushown. If the amount for any purpose is not known, furnish an estitotal of the payments listed must equal the adjusted gross proceeds to above. | mate and check the box to the | left of the estimate. The | | |
| | | Payment to Officers. Directors, & Affiliates | | Payment To Others |
| Salaries and fees. | | □ \$ | | |
| Purchase of real estate | | □ \$ | | |
| Purchase, rental or leasing and installation of machinery and equipment | | □ \$ □ \$ | | |
| Construction or leasing of plant buildings and facilities | LI \$ | L .> | · · · · · · · · · · · · · · · · · · · | |
| may be used in exchange for the assets or securities of another issuer purs | □ \$ | □s | | |
| Repayment of indebtedness | □ \$ | | | |
| Working capital | □ \$ | | 2,009,627 | |
| · . | | □ \$ | | |
| Other (specify): | | | | |
| | | □ \$ | □ s_ | |
| Column Totals | | □ \$ | E \$ | 2,009,627 |
| Total Payments Listed (column totals added) | | x \$ | 2,009, | 627 |
| D. FED | ERAL SIGNATURE | *** | | |
| The issuer had duly caused this notice to be signed by the undersigned duly au an undertaking by the issuer to furnish to the U.S. Securities and Exchange Co non-accredited investor pursuant to paragraph (b)(2) of Rule 502. | | | | |
| Issuer (Print or Type) | Signature | | Date | |
| | | | _ | G |
| Eco-Products, Inc. | | | Septe | mber <u>8</u> , 2008 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | | | |
| Stephen Savage | President and Chief Execu | ntive Officer | | |

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STA | TE SIGNATURE | | | | | |
|-----|--|----------------------------|---|------------------|------------|--|--|
| 1. | . Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | | | | | | |
| | See Appendix, Co | olumn 5, for state respo | nse. | | | | |
| 2. | The undersigned issuer hereby undertakes to furnish to the state administra times as required by state law. | ttor of any state in which | the notice is filed, a notice on Form D (17 | CFR 239.50 | 0) at such | | |
| 3. | The undersigned issuer hereby undertakes to furnish to any state administra | ators, upon written requ | est, information furnished by the issuer to o | fferees. | | | |
| 4. | The undersigned issuer represents that the issuer is familiar with the condit. (ULOE) of the state in which this notice is filed and understands that the issuer conditions have been satisfied. | | | | | | |
| | e issuer has read this notification and knows the contents to be true and has deson. | uly caused this notice to | be signed on its behalf by the undersigned | duly authori | zed | | |
| lss | uer (Print or Type) | Signature | Date | | | | |
| Ec | o-Products, Inc. | The | Sept | ember <u>{</u> , | 2008 | | |
| Na | me of Signer (Print or Type) | Title of Signer (Print or | Type) | | | | |
| Ste | ephen Savage | President and Chief | Executive Officer | | | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

